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## \*BIBDATASHEET\*

CONFIRMATION NO. 8867

Bib Data Sheet

|                             |                                       |              |                        |                                    |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|
| SERIAL NUMBER<br>10/814,764 | FILING DATE<br>03/31/2004<br><br>RULE | CLASS<br>424 | GROUP ART UNIT<br>1645 | ATTORNEY DOCKET NO.<br>17672 (BOT) |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|

## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/11/2004

| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no Met after<br>Allowance | STATE OR COUNTRY<br>MA | SHEETS<br>DRAWING 1 | TOTAL CLAIMS<br>13 | INDEPENDENT CLAIMS<br>5 |
|---|---|------------------------|---------------------|--------------------|-------------------------|
| Verified and Acknowledged<br>Examiner's Signature           | Initials  |                        |                     |                    |                         |

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## TITLE

Pressure sore treatment

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|-----------------|---|--|
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